

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	10/27/01
FORMALITY REVIEW	H.T.	1117	11/15/01
RESPONSE FORMALITY REVIEW	A.M.	50 580	03-15-02

BEST AVAILABLE COPY

INDEX OF CLAIMS

- ✓ Rejected
- || Allowed
- (Through numeral)..... Canceled
- ⊥ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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If more than 150 claims or 10 actions
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9/25
3/15/02